<del></del>		AFFIDAVIT O	F CORRECTION TO BIRTH RECO	ORD	<b>5</b> 0 0	- <b>.</b>	
File Date 10	/11/15 SOUTH CA	ROLINA DEPARTM	ENT OF HEALTH AND ENVIROR	NMENTAL CONT	ROL Page 2		
Enter Correct	REGISTRANT'S FULL NAME AT BIRTH				STATE FILE OR BIRTH NUMBER		
Information Cencerning	NANCY GILMER TALBERT			County	139-15-037855		
Person Whose Birth Record is	BIRTH	Day Year	City or Town	York	South Caroli	na	
Being Amended	DATE UCTODEL	8 1915	PLACE BIRTH CERTIFICATE SHO		SHOULD BE		
ITEMS	ITEM OMITTED	OR IN ERROR	BIRTH CERTIFICATE SHO	JW3	0110015 01		
TO BE	Given name	•	None	Nan	cy Gilmer Talbe	rt	
AMENDED	arven name						
OR							
CORRECTED						·	
	I HEREBY DECLARE UP	ON OATH THAT THE ABO	OVE STATEMENTS ARE TRUE AND CO	PRECT: RELAT	IONSHIP		
AFFIDAVIT	SIGNATURE OF PARENT	x Marian	Islant Thom	au			
NOTARY	SUBSCRIBED AND SWO	AN TO BEFORE ME ON	SIGNATURE OF NOTARY	NOTA	RY COMMISSION EXPIRES		
[AFFIX SEAL]	,	19				10	
AFFIDAVIT				PRECT: RELAT	RELATIONSHIP		
NOTARY	SUBSCRIBED AND SWORN TO BEFORE ME ON		SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES		
[AFFIX SEAL]			1029 Linda P. Chur		February 2/ 1084		
	1 Care i noes	, 10, 10, 10, 10, 10, 10, 10, 10, 10, 10	DO NOT WRITE BELOW TH	IS LINE	<i></i>		
ABSTRACT	NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE)					NAL DOCUMENT S MADE	
of	1   College Record (Womans College of UNC(Greensboro, N. C.)				June 7	, 1937	
Supporting	2	Of a Anomalia as					
Evidence	3						
[for health	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE						
dept. use]	1   Nancy Gilmer Talbert(DOB 10/8/15)						
	2						
	3						
DHEC No. 613	ADDITIONAL INFORMA	ATION					
Rev. 2/75	I certify that I have ext	mined the ARRIETAL	NT STATE REGISTRAR EV	IDENCE REVIEWED	BY	DATE FILED /	
0408	decuments referred to a they show no changes o and appear to be suth	rerecures.	nellwenss	July Sa	Moon	12/12/1	